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			CATIO	N FEE DETE	RMINATIO				Applic	ays a valid OMB of atlon or Docket N	umbe	]
APPLICATION AS FILED – F (Column 1)								ENTITY	OR	OTHER THAN SMALL ENTITY		
	FOR	NUME	ER FILED	NUMBI	ER EXTRA	RATE	E (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	SIC FEE CFR 1.16(a), (b), or (	(c))						\	1			1
SE/	ARCH FEE CFR 1.16(k), (i), or (r							_	1			1
EX/	MINATION FEE								1			1
	CFR 1.16(o), (p), or ( FAL CLAIMS	9))							1			┨
_	CFR 1.16(i)) EPENDENT CLA	IMS	minus 2	0 =   *		Х	=		OR	X =		┨
	CFR 1.16(h))		minus 3			х	=			X =		1
FEE	PLICATION SIZE E CFR 1.16(s))	sheets o is \$250 ( additional	f paper, tl \$125 for : Il 50 shee	and drawings one application somall entity) for ets or fraction the (G) and 37 CFI	ze fee due each ereof. See						•	
MU	LTIPLE DEPENDI	ENT CLAIM PRES	SENT (37 (	CFR 1.16(j))	•							
* If the difference in column 1 is less than zero, enter "0" in column 2.						тот	AL			TOTAL		
							· ·- (		,	, , , , , , , , , , , , , , , , , , , ,		1
	APPL	ICATION AS	AMEND	ED – PART II						`.		
	(Column 1) (Column 2) (Column 3)				SMALL ENTITY			OR	OTHER THAN SMALL ENTITY			
AMENDMENT A	8/31/05	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	(\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	. 34	Minus	<del>"2()</del>	= 12	×	=	1 ΕΕ (Ψ)		x 50 =	7220	1
	Independent	-	Minus	<u> </u>	=				OR		700	1
	(37 CFR 1.16(h))	Application Size Fee (37 CFR 1.16(s))				×	=		OR	X =		-
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								l			1
1	C V	ATION OF MULTIPL	ENT CLAIM (37 CF	K 1.10(j))	TOTAL			OR	TOTAL	(200	۱۲	
'	, 00, 0	t .				ADD'L			OR	ADD'L FEE	1000	]/'
		(Column 1)		(Column 2)	(Column 3)							]
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	: (\$)	ADDI- TIONAL FEÉ (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	*.	Minus	**	= '	×			OR	x =		
	Independent (37 CFR 1.16(h))	*	Minus	***	=	×	_		1			1
	<u> </u>	Fee (37 CFR 1.1	6(s))		L	<u>  ^ - </u>			OR	X =		1
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			1
	<u>L</u>		-			TOTAL ADD'L			OR	TOTAL ADD'L FEE		1
	* If the entry in co	olumn 1 is less the	n the entr	v in column 2. writ	e "0" in column :				j		L	┨

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.